## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number .

10/646720

| CLAIMS AS FILED - PART I  |                |   |                                |                                   |              |                  |       | SMALL ENTITY |                        |        | OTHER                | OTHER THAN             |  |
|---|----------------|---|--------------------------------|-----------------------------------|--------------|------------------|-------|--------------|------------------------|--------|----------------------|------------------------|--|
| TOTAL OLAUMO  |                |   | (Column 1)                     |                                   | (Column 2)   |                  |       | TYPE         |                        | OR     | SMALL                |                        |  |
| TOTAL CLAIMS  |                |   |                                |                                   |              |                  |       | RATE         | FEE                    | ]      | RATE                 | FEE                    |  |
| FOR   |                |   | NUMBER FILED                   |                                   | NUMBER EXTRA |                  |       | BASIC FEE    | _ \$375                | OR     | BASIC FEE            | \$750                  |  |
| TOTAL CHARGEABLE CLAIMS   |                |   | 8 minus 20=                    |                                   | * O          |                  |       | X\$ 9=       |                        | OR     | X\$18=               |                        |  |
| INDEPENDENT CLAIMS .  |                |   | 3 minus 3 = "                  |                                   | * 0          |                  |       | X42=         |                        | OR     | X84=                 |                        |  |
| MULTIPLE DEPENDENT CLAIM PR   |                |   | RESENT                         |                                   |              |                  | Ī     | +140=        |                        | OR     | +280=                |                        |  |
| * If  | the difference | in column 1 is                            | less than zero, enter "0" in c |                                   |              | olumn 2          | L     | TOTAL        |                        | OR     | TOTAL                | 750,00                 |  |
| CLAIMS AS AMENDED - PART II   |                |   |                                |                                   |              |                  |       |              |                        |        | OTHER                |                        |  |
| (Column 1)  |                |   |                                | (Column 2)                        |              | (Column 3)       |       | SMALL        | ENTITY                 | OR     | SMALL                |                        |  |
| AMENDMENT A   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>OUSLY | PRESENT<br>EXTRA |       | RATE         | ADDI-<br>TIONAL<br>FEE |        | RATE                 | ADDI-<br>TIONAL<br>FEE |  |
|   | Total          | *   | Minus                          | **                                |              | =                |       | X\$ 9=       |                        | OR     | X\$18=               |                        |  |
|   | Independent    | *<br>ENTATION OF MU                       | Minus                          | ***                               | CL AINA      | -                |       | X42=         |                        | OR     | X84=                 |                        |  |
|   | FIRST FRESL    | :NTATION OF INIC                          | JLIPLE DE                      | PENDENT                           | CLAtivi      |                  |       | +140=        |                        | OR     | +280=                |                        |  |
|   |                |   |                                |                                   |              |                  |       | TOTAL        |                        | OB     | TOTAL                |                        |  |
|   |                | (Column 1)                                |                                | (Colum                            | on 2)        | (Column 3)       | A     | DDIT. FEE    |                        | J      | ADDIT. FEE           |                        |  |
| AMENDMENT B   |                | CLAIMS                                    |                                | HIGHE                             | EST          |                  |       |              | ADDI-                  | 1 1    |                      | ADDI-                  |  |
|   |                | REMAINING<br>AFTER<br>AMENDMENT           |                                | NUME<br>PREVIO<br>PAID F          | USLY         | PRESENT<br>EXTRA |       | RATE         | TIONAL<br>FEE          |        | RATE                 | TIONAL<br>FEE          |  |
|   | Total          | *   | Minus                          | **                                |              | =                |       | X\$ 9=       |                        | OR     | X\$18=               |                        |  |
| AME   | Independent    | *   | Minus                          | ***                               | OL A184      | =                |       | X42=         |                        | OR     | X84=                 |                        |  |
|   | FIRST PRESE    | ENTATION OF MU                            | JLI IPLE DEI                   | PENDENI                           | CLAlivi      |                  |       | +140=        |                        | OR     | +280=                |                        |  |
|   |                |   |                                |                                   |              |                  | Ļ     | TOTAL        |                        |        | TOTAL                |                        |  |
|   |                | (O-1,                                     |                                | (0-1                              | 2)           | 10.1             | ΑI    | DDIT. FEE    |                        | UH ,   | ADDIT. FEE           |                        |  |
| -   |                | (Column 1)<br>CLAIMS                      |                                | (Colum                            |              | (Column 3)       |       |              |                        |        |                      |                        |  |
| ENT C   |                | REMAINING<br>AFTER<br>AMENDMENT           |                                | NUMB<br>PREVIO<br>PAID F          | BER<br>OUSLY | PRESENT<br>EXTRA |       | RATE         | ADDI-<br>TIONAL<br>FEE |        | RATE                 | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total          | *   | Minus                          | **                                |              | =                |       | X\$ 9=       |                        | OR     | X\$18=               | ·                      |  |
| \ME   | Independent    | *   | Minus                          | ***                               |              | =                |       | X42=         |                        | OR     | X84=                 |                        |  |
|   | FIRST PRESE    | NTATION OF MU                             | JLTIPLE DE                     | PENDENT                           | CLAIM        |                  | H     | <del></del>  |                        | On     | ,                    |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                |   |                                |                                   |              |                  |       |              |                        | OR     | +280=                |                        |  |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                |   |                                |                                   |              |                  |       |              |                        | OR     | TOTAL<br>ADDIT. F.EE |                        |  |
|   |                | nber Previously Pai                       |                                |                                   |              |                  | found | d in the app | ropriate box           | in col | umn 1.               |                        |  |